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ANTIPSYCHOTICS AND DEMENTIA

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Introduction: According to the literature, up to 90% of patients with Alzheimer's disease present at least one behavioral or psychiatric symptom (BPSD) and their overall frequency tends to increase during the course of illness. Three main BPSD syndromes are usually described: agitation, psychosis and mood disorders. These syndromes have an important impact on patients and their caregivers, representing a distress factor leading to reduced quality of life and, ultimately, the need for institutionalization. Antipsychotic drugs have been used for this purpose, but their benefits are still uncertain and some studies brought up concerns about their safety - particularly increased risk of cerebrovascular adverse events and death.

Aims and objectives: The authors aim to present a review of the relevant literature, concerning the treatment of BPSD, focusing particularly on the antipsychotic treatment. We aim to discuss their indication, efficacy and safety. We illustrate this review with 1 clinical vignette.

Methods: Systematic review of the most recent and relevant literature.

Discussion and conclusions: According to some studies, atypical antipsychotics are equal or more effective than placebo in the treatment of psychosis and aggression. However, adverse effects seem to limit their effectiveness. Therefore, the prescription of antipsychotics for these patients should be restricted to people with severe symptoms causing risk or extreme distress that have not responded to other measures, and treatment should only be continued beyond 12 weeks in exceptional circumstances.